

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants : Jun Yan, et al.
Filed : November 3, 2003
For : MEMS DRIVES STRUCTURES

Docket No. : MVIS 02-24

Mail Stop Patent Application
Commissioner for Patents
P. O. Box 1450
Alexandria, VA 22313-1450

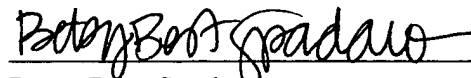


CERTIFICATE OF MAILING BY "EXPRESS MAIL"

Sir:

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Respectfully submitted,
Microvision, Inc.


Betsy Best-Spadaro

CAW:bbs

Enclosures:

Postcard
Check
Transmittal and Fee Calculation Sheet (+ copy)
Specification, Claims, Abstract (61 pages)
15 Sheets of Drawings (Figures 1-30)

Microvision, Inc.
PO Box 3008
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NEW UTILITY PATENT APPLICATION TRANSMITTAL AND FEE TRANSMITTAL

Inventors: Jun Yan, Vincenzo Casasanta III, Selso H. Luanava, Hakan Urey,
Frank A. DeWitt IV, Clarence T. Tegreene, Christopher A. Wiklof

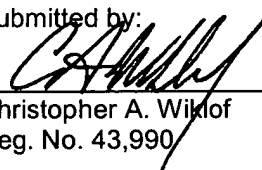
For: MEMS DRIVE STRUCTURES

| APPLICATION ELEMENTS AND ACCOMPANYING PARTS | |
|---|---|
| <input checked="" type="checkbox"/> | U.S. Utility Patent Application: Specification, Claims, Abstract (61 pages). |
| <input checked="" type="checkbox"/> | 15 Sheets of Drawings (Figs. 1-30). |
| <input checked="" type="checkbox"/> | Applicant(s) Claim Small Entity Status. |
| <input type="checkbox"/> | A Declaration and Power of Attorney. |
| <input type="checkbox"/> | An assignment of patent application to Microvision, Inc., a corporation of the State of Washington. |
| <input type="checkbox"/> | A Preliminary Amendment. |
| <input type="checkbox"/> | An Information Disclosure Statement, Form PTO-1449, and Copies of Citations. |
| <input checked="" type="checkbox"/> | Filed without formal signature documents or fee. |

| SMALL ENTITY FEE CALCULATION | | | | | | | |
|------------------------------|-----------|-----|---|-------|---|-----------|--------------|
| Utility Filing Fee | | | | | | | \$385 |
| Claims: | No. Filed | | | Extra | | Surcharge | |
| Total Claims | 20 | -20 | = | 0 | x | \$9 | = \$0 |
| Independent Claims | 3 | -3 | = | 0 | x | \$42 | = \$0 |
| Multiple Dependent Claims | 0 | | | 0 | | \$140 | \$0 |
| Assignment Recordation | 0 | | | 0 | | \$40 | \$0 |
| Total Fee Enclosed | | | | | | | \$425 |

| METHOD OF PAYMENT | | | |
|---|--------------------------------------|--------------------------------|--|
| <input checked="" type="checkbox"/> Payment enclosed | | | |
| <input checked="" type="checkbox"/> Check | <input type="checkbox"/> Money Order | <input type="checkbox"/> Other | |
| <input checked="" type="checkbox"/> The Director is hereby authorized to <input checked="" type="checkbox"/> Credit any over payments to Deposit Account No. 500284 <input checked="" type="checkbox"/> Charge any additional fees required under 37 C.F.R. §§ 1.16 and 1.17 to Deposit Account No. 500284. | | | |

Submitted by:


Christopher A. Wiklof
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Date

11/3/2003